

**APPLICATION FOR SOLAR PERMIT
CITY OF TAYLORVILLE**

OFFICE USE ONLY

FEE PAID:

DATE: _____

PROPERTY OWNER INFORMATION

NAME: _____

ADDRESS: _____

PHONE: _____

PLANNED PROJECT DATE

CONSTRUCTION DATE: _____

COMPLETION DATE: _____

PROJECT DETAILS

- ☐ SMALL SOLAR ENERGY SYSTEM
- ☐ LARGE SOLAR ENERGY SYSTEM
- ☐ SOLAR PV PLAN INCLUDED (MUST BE INCLUDED FOR PERMIT)

- ☐ GROUND MOUNTED
- ☐ BUILDING MOUNTED

TOTAL COST: _____

ELECTRICIAN: _____

PHONE: _____

EMAIL: _____

ADDRESS: _____

Application is for foundation only. I AGREE TO SUBMIT A SITE PLAN FOR FINAL REVIEW TO THE CITY OF TAYLORVILLE.

_____ Hereby agree to construct and above described foundation in accordance with the plat, building plans and specifications submitted herewith, and in strict compliance with all provisions of the zoning Ordinance, Building Code and Health Regulations of the City of Taylorville, all other City ordinances, deeds, and proprietary certificates, including its setback and minimum square footage requirements, and any other limitations or restrictions on record.

As contractor, I do hereby certify that I will accept any and all responsibility for any and all damages to property owned, leased, or sub-let by the City of Taylorville and its agents, including sidewalks, gutters, alleys, streets and any other city property.

PERMIT ISSUED: _____

BUILDING PERMIT NO: _____

OCCUPANCY PERMIT NO. _____

OWNER: _____

CONTRACTOR: _____

BUILDING OFFICER: _____

NO PERMIT SHALL BE ISSUED TO ANYONE THAT IS IN DEFAULT TO THE CITY

Please submit the completed form via email to Trevor Wagahoft at hbo@taylorville.net or deliver it in person to the City Clerk's Office.

CREDIT CARD PAYMENT INFORMATION

NAME ON SOLAR PERMIT: _____

COMPANY MAKING PAYMENT: _____

NAME ON CARD: _____

CARD #: _____

EXPIRATION DATE: _____

CVV: _____

BILLING ZIP CODE: _____

EMAIL: _____

